



Estimate Request Form

Name: _____ Today's Date: _____

Address: _____ Installation site: _____

City: _____ City: _____

State: _____ Zip Code: _____ State: _____ Zip Code: _____

Phone: () _____ Contractor: _____

Email: _____ Primary Contact: _____

Project Details

Condition: () New () Remodel

Room: () Kitchen () Island () Bath () Bar () Office () Fireplace Surround () Other: _____

Backsplash Height: () Standard 4" () None () Full Height Backsplash () Other: _____

Sink Type: () Drop In () Under Mount () Vessel () Farmhouse Sink () Other: _____

Sink to be provided by Stonecrafters () No () Yes: _____

Stove Type: () Cooktop () Slide In Range () Free Standing

Material Option

Brand: _____ Color: _____

Brand: _____ Color: _____

Edge Profile:



Other: _____

Other Service per Quotation Basis:

() Removal of Existing tops () Plumbing (sink hook up) () Cook Top Hook Up

Note: _____
